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DECLARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		MHAWK9				
First Named Inventor		DABROWA, Paul				
СОМР	LETE	IF KNOWN				
Application Number	10/7	89,945				
Filing Date Febr		ruary 27, 2004				
Group Art Unit	376	5				
Examiner Name	unas	signed				

I hereby declare that:										
Each inventor's residence, mail	iling address, and citizens	ship are as stated below no	ext to their name.							
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a paten is sought on the invention entitled:										
SYSTEM AND METHOD OF PRODUCING MULTI-COLORED CARPETS										
(Title of the Invention)										
the specification of which		•								
is attached hereto										
OR was filed on (MM/DD/YY)	(YY) February 27, 2	2004 as Ut	nited States Applicat	tion Number or PCT International						
Application Number 10/78	89,945 and was	as amended on (MM/DD/	D/YYYY)	(if applicable)						
I hereby state that I have revie amended by any amendment s	ewed and understand the	e contents of the above in		'''						
I acknowledge the duty to disc continuation-in-part applicatio and the national or PCT intern	ons, material information	on which became available	nle hetween the filin	37 CFR 1.56, including for ing date of the prior application						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PT)-9199 and select option 2.

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DECLARATION — Utility or Design Patent Application

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: OR Registered practitioner(s) to prosecute this application and to transact all business in the Patent 006980															
Name Registration Num											Registration Number				
Additional registered practitioner(s) named on supplemental R															
						Regi	stered P	ractitio	ner Inf	ormation	sheet P7	O/SB/020	Cattached hereto.		
Direct all cor				er numbe Code Lab			006980 OR Corresponde			esponden	ce address below				
Name		R. Boss													
Address		nan Sander													
Address		achtree Str	eet, Suite	5200											
City .	Atlanta	1					S	State GA ZIP			ZIP	3030	30308		
Country	US			Teleph			4-885-						4-962-6512		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned inventor															
	Given N	lame (first an	d middle (i	fanyl)									····		
		Pau		areasin'	Payl) Family Name or Surnar Dabrowa										
Inventor's		1)								va			
Signature	gnature			<u>, </u>								Date	8-23-04		
Residence: (State	GA		Cou	itry	u	<u> </u>	Cit	izenship	us		
Mailing Add	ress	216		<u> </u>											
City		Rocky	Face	State	<u>G</u> A		ZIP	30	740	Co	untry	u.s			
Name of Second Inventor: A petition has been filed for this unsigned inventor							ventor								
Given Name (first and middle [if any])			_	Family Name or Surname											
Charlie Inventor's				لـر	Thompson										
Signature				in The			mpa			6-	6-25-04				
Residence: C	City	Cohut	ha	State	GA		Count	ry	us			zenship	us		
Mailing Addı	ess			North	Dr										
City		Cohut	ta	State	GA	\prod	ZIP	307	710	Cor	untry	us			
⊠ Add	tional inve	ntors or a legal	representativ	e are being	named on	the <u>1</u>	suppleme	ntal she	et(s) PT	O/SB/02A	or 02LR	attached her	eto.		

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1							
Name of Additional Joint Inventor, if any:												
Given Na	me (first and middle [if any])				Family:	Name or	Sum	ame			
Dina				Poindexter								
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Given Name (first and middle [if any]) Family Name or Surname												
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Inventor's Signature	Katkina X		8				Date 4					
Residence: City	Cleveland	State	TN	Country USA			Citi	zenship	us			
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Name (first and middle [if any])					Family Name or Surname							
Ashlee	Swift Swift											
Inventor's Signature	aonlee S					Date B/28/04						
Residence: City	Dalton						us .					
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Post Office Address	Office Address											
City	Dalton	State	GA		ZIP	30720	Coun	dry	us			

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